



## Application Data Sheet

### Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	REDUCTION OF THE IMMUNOGENICITY OF NON-HUMAN GRAFTS
Attorney Docket Number::	1501-1010
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: DENMARK  
Status:: Full Capacity  
Given Name:: THOMAS  
Middle Name::  
Family Name:: BREVIG  
City of Residence:: KOKKEDAL  
State or Province of Residence::  
Country of Residence:: DENMARK  
Street of Mailing Address:: DROSSELVAENGET 205

City of Mailing Address:: KOKKEDAL  
State or Province of Mailing Address::  
Country of Mailing Address:: DENMARK  
Postal or Zip Code of Mailing Address:: DK-2980

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: DENMARK  
Status:: Full Capacity  
Given Name:: TOM  
Middle Name::  
Family Name:: KRISTENSEN  
City of Residence:: NYBORG  
State or Province of Residence::  
Country of Residence:: DENMARK  
Street of Mailing Address:: HAVREVEJ 26

City of Mailing Address:: NYBORG  
State or Province of Mailing Address::  
Country of Mailing Address:: DENMARK  
Postal or Zip Code of Mailing Address:: DK-5800

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: DENMARK  
Status:: Full Capacity  
Given Name:: JENS  
Middle Name::  
Family Name:: ZIMMER RASMUSSEN  
City of Residence:: ODENSE C  
State or Province of Residence::  
Country of Residence:: DENMARK  
Street of Mailing Address:: OLAF RYES GADE 5

City of Mailing Address:: ODENSE C  
State or Province of Mailing Address::  
Country of Mailing Address:: DENMARK  
Postal or Zip Code of Mailing Address:: DK-5000

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SWEDEN  
Status:: Full Capacity  
Given Name:: JAN  
Middle Name::  
Family Name:: HOLGERSSON  
City of Residence:: HUDDINGE  
State or Province of Residence::  
Country of Residence:: SWEDEN  
Street of Mailing Address:: VENUSVÄGEN 6A

City of Mailing Address:: HUDDINGE  
State or Province of Mailing Address::  
Country of Mailing Address:: SWEDEN  
Postal or Zip Code of Mailing Address:: SE-141 33

**Correspondence Information**

Correspondence Customer Number:: 000466

**Representative Information**

Representative Customer Number::	000466
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/SE00/01648	8/28/00

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
SWEDEN	9903021-5	8/26/99	Yes

**Assignment Information**

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::